

Montana Office of Public Instruction Title I Teacher Survey

To help in planning for next year's Title I program, please complete this short survey. Your feedback will allow us to make modifications that will better serve students. Please circle your response to each of the following items with "1" being the lowest and "4" being the highest.

1. I receive timely information about student progress from the Title I teacher.

1 2 3 4

2. The students most in need of assistance are selected to be in the Title I program.

1 2 3 4

3. My students feel better about themselves and their reading because of assistance from the Title I teacher.

1 2 3 4

4. The Title I teacher has been available when I need to talk to him/her.

1 2 3 4

5. The Title I teacher and I work together so that Title I instruction complements and/or extends classroom reading and/or math instruction.

1 2 3 4

6. The Title I students in my class have shown improved reading achievement.

No

Yes

7. I have read and understand the District's Title I Parent-School Compact.

No

Yes

8. I have read, and I understand the District's Parental Involvement Policy.

No

Yes

Thank you for your responses to this survey! Please print your comments or suggestions for the Title I program at the bottom of this page.